INVOICE

SH0416R&B

6/8/2016 Kbratcher

TO: US Marshal's Service Federal Bldg

110 9th Avenue North

The Metropolitan Government of Nashville and Davidson County

Davidson County

Sheriff's Office

Room A-750

Nashville, TN 37203Address:506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AM	IOUNT
4/1/16	April-16 Contract Number J-B-75-M-160 153 days @ \$61				\$	9,333.00
Please return remittance P.O. Box 196383 Nashvil Contact: Kristie Bratcher				TOTAL	\$	9,333.00

CIS#	Name	Admit	Release	LOS
797237	DAVIS, EVETTE S	4/14/16	4/15/16	1
667669	DUARTE, PEDRO GOMEZ	4/13/16	4/18/16	5
764472	FOXX, ROBERT DANTE	7/8/15	5/3/16	30
502315	FUQUA, QUINCY MAUNICE	2/26/10	4/4/16	3
769735	GRAHAM, ANTONIO MONTREZ	8/20/15	5/6/16	30
650461	HARRIS, OMEGA P	1/24/13	5/3/16	30
798559	HUMBERTO-GINEZ, EDMUNDO	4/25/16	4/26/16	1
795382	JACKSON, CHRISTOPHER A	4/8/16	4/12/16	4
797382	LEONARD, BRANDON LEE	4/15/16	5/3/16	16
794155	LEWIS, MITCHELL D	4/4/16	4/6/16	2
797993	PAPE, KRYSTIN	4/21/16	4/21/16	0
797270	SWEENEY, JAMECIA LAVONSHA	4/14/16	4/15/16	1
644615	WILLIAMS, LEO KENNETH	12/7/12	5/6/16	30
				153

INVOICE

SH0516R&B

9/14/2016 Kbratcher

TO: US Marshal's Service FROM: The Metropolitan Government of Nashville and Davidson County

Estes Keefauver Federal Bldg

110 9th Avenue North Dept: Sheriff's Office Room A-750

Nashville, TN 37203 Address: 506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT
	May-16 Contract Number J-B-75-M-160 59 days @ \$61				\$ 3,599.00
Please return remittance advice to Davidson County Sheriff's Office 2.O. Box 196383 Nashville, TN 37219-6383 Contact: Kristie Bratcher 615-862-8222				TOTAL	\$ 3,599.00

CIS#	Name	Admit	Release	LOS
711475	CUNNINGHAM, GERALD LAMONT	5/28/16	5/31/16	3
787100	DEMAIO, JOSEPH DAVID	5/5/16	5/6/16	1
802394	FLETCHER, RICHARD B	5/27/16	5/31/16	4
764472	FOXX, ROBERT DANTE	7/8/15	5/3/16	2
800454	FRAZIER, DAVID ANTWAN	5/16/16	5/17/16	1
802500	GILL, JASWANT S	5/27/16	5/31/16	4
799331	GONZALES-BERNAL, JOSE EDUARDO	5/2/16	5/3/16	1
800420	HANCOCK, TRACEY RENE	5/10/16	5/11/16	1
650461	HARRIS, OMEGA P	1/24/13	5/3/16	2
714344	LAMPKINS, DONSHA E	5/20/16	5/31/16	11
797382	LEONARD, BRANDON LEE	4/15/16	5/3/16	2
801181	ONAGHINOR, MCCARTHY O	5/27/16	6/6/16	5
798917	WEBSTER, RAMELL BROWN	5/3/16	5/5/16	2
644615	WILLIAMS, LEO KENNETH	12/7/12	5/6/16	5
787860	JONES, DAVID THOMAS	5/9/16	5/19/16	10
769735	GRAHAM, ANTONIO M	5/1/16	5/6/16	5
				59

INVOICE

SH0616R&B

9/14/2016 Kbratcher

TO: US Marshal's Service FROM: The Metropolitan Government of Nashville and Davidson County

Estes Keefauver Federal Bldg
110 9th Avenue North

Dept: Sheriff's Office

Room A-750
Nashville, TN 37203
Address: 506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT	
	June-16 Contract Number J-B-75-M-160 37 days @ \$61				\$	2,257.0
ease return remittance a D. Box 196383 Nashvill entact: Kristie Bratcher (				TOTAL	\$	2,257.0

CIS#	Name		Admit	Release	LOS
795444		BANGURA, OLAYINKA	6/9/16	6/15/16	6
803416		CARUTHERS, RICKY ALVALON	6/15/16	7/1/16	16
805129		HODISON, BUIN EDWARD	6/29/16	6/30/16	1
799903		MONTGOMERY, ADRIAN L	6/7/16	6/8/16	1
803183		MOORE, SAMUEL L	6/8/16	6/13/16	5
801181		ONAGHINOR, MCCARTHY O	5/16/16	6/6/16	5
804427		RILEY, KHALINA CHEREE	6/13/16	6/14/16	1
806185		STARKS, IVY C	6/28/16	6/29/16	1
803982		TUTTLE, JAMES EARL	6/9/16	6/10/16	1

INVOICE

SH0716R&B

12/19/2016 Kbratcher

TO: US Marshal's Service FROM: The Metropolitan Government of Nashville and Davidson County

Estes Keefauver Federal Bldg
110 9th Avenue North

Dept: Sheriff's Office

Room A-750
Nashville, TN 37203
Address: 506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AN	OUNT
7/1/16	July-16 Contract Number J-B-75-M-160 9 days @ \$61		9000	7.0000	\$	549.0
se return remittance Box 196383 Nashvil	advice to Davidson County Sheriff's Office			TOTAL	\$	549.0

CIS#	Name	Admit	Release	LOS
809697	AGUIRRE-DELGADO, ELI	7/29/16	8/1/16	3
809542	BURNS, JAMES FREDRICK	7/28/16	7/29/16	1
808539	CLARK, RONALD URIUS	7/19/16	7/21/16	2
807474	FRANCISCO, DAVID THOMAS	7/26/16	7/27/16	1
807298	POORE, MICHAEL	7/11/16	7/13/16	2
				9

INVOICE

SH0816R&B

12/19/2016 Kbratcher

TO: US Marshal's Service FROM: The Metropolitan Government of Nashville and Davidson County

Estes Keefauver Federal Bldg
110 9th Avenue North

Dept: Sheriff's Office

Room A-750

Nashville, TN 37203Address:506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT
	August-16 Contract Number J-B-75-M-160 12 days @ \$61				\$ 732.00
Please return remittance : P.O. Box 196383 Nashvill Contact: Kristie Bratcher (				TOTAL	\$ 732.00

CIS#	Name	Admit	Release	LOS
809976	AGUIRRE-DELGADO, ELI	8/1/16	8/2/16	1
810354	BARRETT, JONATHAN RAY	8/4/16	8/5/16	1
810639	BELL, TERRANCE LAMONT	8/7/16	8/8/16	1
810970	BURNETTE, STACEY DEWUAN	8/10/16	8/11/16	1
811988	DIACONU, VLAD	8/18/16	8/19/16	1
810608	ENDSLEY, HOWARD E	8/8/16	8/9/16	1
810007	HATCHER, TYWAN L	8/9/16	8/10/16	1
810983	HORTON, TREMAYNE DION	8/10/16	8/11/16	1
813311	PETERS, ANTHONY	8/30/16		1
812067	HEFFINGTON, PHILLIP	8/19/16	8/22/16	3
				12

INVOICE

SH0916R&B

12/19/2016 Kbratcher

TO: US Marshal's Service Factor In Marshal's Service Davidson County

Estes Keefauver Federal Bldg
110 9th Avenue North
Room A-750
Nashville, TN 37203

PROM: The Metropolitan Government of Nashville and Davidson County

Dept: Sheriff's Office
Sheriff's Office
Address: 506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT
9/1/16	September-16 Contract Number J-B-75-M-160 11 days @ \$61		Code	Account	\$ 671.00
Please return remittance P.O. Box 196383 Nashvi Contact: Kristie Bratcher				TOTAL	\$ 671.00

CIS#	Name	Admit	Release	Days
774570	CAMPBELL, JAVONTA VESHON	9/28/16	9/30/16	2
814525	CHATMAN, WILLIE	9/9/16	9/12/16	3
814939	DAVIS, PRESTON E	9/13/16	9/14/16	1
815885	DEES, RICKY LEON	9/21/16	9/22/16	1
766866	STARKS, DARRYL A	9/9/16	9/13/16	4
				11

INVOICE

SH1016R&B

12/19/2016 Kbratcher

TO: US Marshal's Service FROM: The Metropolitan Government of Nashville and Davidson County

Estes Keefauver Federal Bldg
110 9th Avenue North
Room A-750
Nashville, TN 37203

FROM: The Metropolitan Government of Nashville and Davidson County

Sheriff's Office

Address: 506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT
10/1/16	October-16 Contract Number J-B-75-M-160 7 days @ \$61		Godo	, recount	\$ 427.00
Please return remittance : P.O. Box 196383 Nashvill Contact: Kristie Bratcher (	TOTAL	\$ 427.00			

CIS#	Name	Admit	Release	LOS
818015	BRUSH, FREDERICK JAMES	10/19/16	10/20/16	1
801777	LEWIS, MITCHELL D	10/29/16	11/7/16	3
817854	OLDHAM, VERNON E	10/14/16	10/17/16	3

INVOICE

SH1116R&B

3/31/2017 Kbratcher

TO: US Marshal's Service FROM: The Metropolitan Government of Nashville and Davidson County

Estes Keefauver Federal Bldg
110 9th Avenue North Dept: Sheriff's Office

Room A-750
Nashville, TN 37203
Address: 506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AN	MOUNT
	November-16 Contract Number J-B-75-M-160 15 days @ \$61				\$	915.0
ise return remittance advice to Davidson County Sheriff's Office Box 196383 Nashville, TN 37219-6383					\$	915.

CIS#	Name	Admit	Release	LOS
802028	BATEY, KIA LAJUANIA	11/3/16	11/4/16	1
821836	JOHNSON, ANTONIO LAMONT	11/15/16	11/16/16	1
718863	KING, JAY PEARL	11/2/16	11/4/16	2
801777	LEWIS, MITCHELL D	5/21/16	11/7/16	6
820377	LORD, DOUGLAS MYRON	11/3/16	11/4/16	1
822262	SHIELDS, KEELAN	11/18/16	11/22/16	4
				15

INVOICE

SH1216R&B

3/31/2017 Kbratcher

TO: US Marshal's Service FROM: The Metropolitan Government of Nashville and Davidson County

Estes Keefauver Federal Bldg
110 9th Avenue North

Dept: Sheriff's Office

Room A-750

Nashville, TN 37203 Address: 506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT	
	December-16 Contract Number J-B-75-M-160 5 days @ \$61				\$ 30	05.00
Please return remittance P.O. Box 196383 Nashvil Contact: Kristie Bratcher		TOTAL	\$ 36	05.00		

CIS#	Name	Admit	Release		LOS
CIS#	Name	Admit	Release		LOS
824156	SPENCER, RUSHA M	12/13/16	12/15/16	2	
824095	THIRKILL, EMMANUEL	12/9/16	12/12/2016	3	
				5	

INVOICE

SH0117R&B

3/31/2017 Kbratcher

Address: 506 Second Avenue North, Nashville, TN 37201

TO: US Marshal's Service Faceral Bldg
110 9th Avenue North Room A-750

FROM: The Metropolitan Government of Nashville and Davidson County

Dept: Sheriff's Office

Nashville, TN 37203

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT
1/1/17	January-17 Contract Number J-B-75-M-160 4 days @ \$61		Code	Account	\$ 244.00
Please return remittance P.O. Box 196383 Nashvii Contact: Kristie Bratcher				TOTAL	\$ 244.00

CIS#	Name	Admit	Release	LOS
827284	MCGILL, PAUL D	1/17/17	1/19/17	2
825206	OCHAN, OBOB OMAN	1/3/17	1/5/17	2
				4

INVOICE

SH0117TRANS

Original - State / Federal Agency Copy 1 - Metro Division of Accounts Copy 2 - Metro Division of Accounts

3/17/2017 Kbratcher

The Metropolitan Government of Nashville and

Copy 3 - Department

TO:

FROM:

US Marshal's Service Estes Keefauver Federal Bldg **Davidson County** 

110 9th Avenue North

Sheriff's Office

Dept: Room A-750 Nashville, TN 37203

Address: 506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT
1/1/17 1/31/2017		10101			
	Prisoner Transport (see attached sheets)				36.61
	mittance advise to Davidson County Sheriff's nue North, Nashville, TN 37201 (615) 862-82		TOTAL	\$ 36.6	

	I					
		DAVIDSON C	OLINTY SHERI	FE'S OFFICE		
DAVIDSON COUNTY SHERIFF'S OFFICE SUMMARY OF U.S. PRISONERS TRANSPORT						
			Jan-17			
	MILEAGE	MILEAGE	OFFICER @	GUARD @	OFFICER/GUARD	TOTAL
DATE	@ .535	\$AMOUNT	17.50 HR	17.50 HR	\$AMOUNT	\$AMOUNT
01/05/17	3	1.61	1	1	35.00	36.605
	3.00	1.61	1.00	1.00	35.00	36.61

INVOICE

SH0117TRANS

Original - State / Federal Agency Copy 1 - Metro Division of Accounts Copy 2 - Metro Division of Accounts

3/17/2017 Kbratcher

Copy 3 - Department

TO:

FROM: The Metropolitan Government of Nashville and

US Marshal's Service

**Davidson County** 

Estes Keefauver Federal Bldg 110 9th Avenue North

Sheriff's Office

Dept:

Room A-750 Nashville, TN 37203

Address: 506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT
1/1/17 1/31/2017		10101			
	Prisoner Transport (see attached sheets)				91.4
	mittance advise to Davidson County Sheriff's nue North, Nashville, TN 37201 (615) 862-82			TOTAL	\$ 91.

INVOICE

SH0117R&B

3/31/2017 Kbratcher

TO: US Marshal's Service Faceral Bldg
110 9th Avenue North Room A-750

FROM: The Metropolitan Government of Nashville and Davidson County

Dept: Sheriff's Office

Nashville, TN 37203Address:506 Second Avenue North, Nashville, TN 37201

Period Covered	Program Name & Contract Number	Fund	Revenue Code	Sub- Account	AMOUNT
	February-17 Contract Number J-B-75-M-160 11 days @ \$61				\$ 671.00
P.O. Box 196383 Nashvill	ease return remittance advice to Davidson County Sheriff's Office O. Box 196383 Nashville, TN 37219-6383 ontact: Kristie Bratcher 615-862-8222				

CIS#	Name	Admit	Release	LOS
787948	BOLING, CHRISTOPHER RONALI	2/3/17	2/6/17	3
830687	BRADFORD, DON MONTRAIL	2/8/17	2/9/17	1
833091	HARWELL, WILLIAM DAWSON	2/28/17	3/1/17	1
830711	MATEO-LUCAS, BERNARDO	2/8/17	2/9/17	1
831190	RHOADES, DAVID E	2/13/17	2/14/17	1
828958	THOMPSON, DEVAN JAVON	1/24/17	2/3/17	2
	MARTIN, DWIGHT D	2/26/17	2/28/17	2
				11

CIS#	Name	Admit	Release	LOS
793479	BONILLA, JUAN	3/2/17	3/7/17	5
793472	CARDOZA MARTINEZ, VICTOR A	3/2/17	3/7/17	5
819175	SMITH, CORNELIUS E	3/17/17	4/24/17	15
836219	FIZER, ANTHONY L	3/29/17	3/31/17	2
				27

CIS#	Name	Admit	Release	LOS
837821	ALLEN, ERIC J	4/24/17	4/26/17	2
820563	JENKINS, DUANTEZ CORNELL	4/28/17	5/1/17	3
819175	SMITH, CORNELIUS E	3/17/17	4/24/17	23
835637	VARGAS, URIEL	4/3/17	4/4/17	1
837820	WILLIAMS JOE LEWIS	4/20/17	4/21/17	1

Standard Form 1034 Revised October 1987 Department of the Tre 1 TFM 4-2000		PUBLIC VOL SERVICE	VOUCHER NUMBER					
l	U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF JUSTICE U.S. MARSHALS SERVICE 110 9TH AVENUE SOUTH, ROOM A-750 NASHVILLE, TN 37203				PARED		SCHEDULE NUMBER	
U.S. MARSHA 110 9TH AVE					AND DATE  60 R AND DAT		PAID BY	
PAYEE'S		on County Sheriff's Cox 196383	Office				_	DATE INVOICE RECEIVED
NAME AND	Nashvil	le, TN 37219-6383						
ADDRESS	DUNS#	<sup>‡</sup> 078217668	INVO	ICE# DCS	SO0317	7		DISCOUNT TERMS  PAYEE'S ACCOUNT NUMBER
SHIPPED FROM		ТО			WE	EIGHT		GOVERNMENT B/L NUMBER
NUMBER AND DATE	DATE OF DELIVERY	ARTICLES (Enter description, item number)	S OR SERVICES	supply schodulo	QUAN-	UNIT PRICE		AMOUNT
OF ORDER	OR SERVICE		tion deemed necessary		TITY	COST	PER	(1)
03/01/2017	03/31/2017	Care and Custody of month of March	Federal Inmate	s for the	27	61	day	1,647
(Use continuation sheet(s	s) if necessary)	(Payee must NOT	use the space	below)		T	OTAL	- 1,647
PAYMENT:  PROVISIONAL  COMPLETE	APPROVED	FOR =\$	EXCHANGE RA	TE =\$1.00	DIFFER	ENCES —		
PARTIAL	BY <sup>2</sup>							
FINAL					Amount verified; correct for paymen			
PROGRESS  ADVANCE	TITLE				(Signatu	ıre or initials)		
Pursuant to author	ity vested in m	e, I certify that this voucher	is correct and pro	pper for paym	ent.			
(Date)		(Authorized Certifyir	ng Officer) <sup>2</sup>				(Title)	
		A	CCOUNTING CLA	ASSIFICATIO	N			
D. JOHEOVANIAM		NACCOUNT OF H.S. TDE	A CLIDY	OUEOK NII	MADED		ONL (Ma	me of bank)
P CHECK NUM	DER OI	N ACCOUNT OF U.S. TRE	AJUK I	CHECK NU	INIDEK			
D CASH B \$		ATE		PAYEE <sup>3</sup>				
	and authority to ap	oprove are combined in one persor	n, one signature only is	necessary; other	rwise the a	pproving	PER	
	ceipted in the nam capacity in which	over his official title.  The of a company or corporation, the he signs, must appear. For example					TITLE	

# PRIVACY ACT STATEMENT

The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.

Re De	andard Form 1034 vised October 1987 partment of the Tre FM 4-2000		PUBLIC VO	VOUCHER NUMBER					
DE	DEPARTMENT, BU PARTMEN S. MARSHA	T OF JUS	-	05/	DATE VOUCHER PREPARED 05/02/2017 CONTRACT NUMBER AND DATE				SCHEDULE NUMBER PAID BY
ı	O 9TH AVEI SHVILLE, T		TH, ROOM A-750		A# JB75M10		ΓΕ		
	PAYEE'S		on County Sheriff's 0	Office					DATE INVOICE RECEIVED
	NAME AND ADDRESS	Nashvi	lle, TN 37219-6383						
	ADDRESS	DUNS	# 078217668	INVO	DICE# DCS	O317T	R		DISCOUNT TERMS  PAYEE'S ACCOUNT NUMBER
SHIF	PPED FROM		ТО			WE	EIGHT		GOVERNMENT B/L NUMBER
	ADED AND DATE	DATE OF	ARTICLE	S OR SERVICES		CHAN	UNIT PR	ICE	AMOUNT
NOI	MBER AND DATE OF ORDER	DELIVERY OR SERVICE	(Enter description, item number and other information)	r of contract or Federa ation deemed necess		QUAN- TITY	COST	PER	(1)
03/01/2017		03/31/2017	7 Transport of federal i month of March Cordoza, Victor 3/7/1		g the	1	36.62		36.62
			Hernandez, Deigo 3/						
(Use	continuation sheet(s	s) if necessary)	(Payee must NOT	use the space	e below)		T	OTAL	36.62
PAYI	MENT:   PROVISIONAL   COMPLETE	APPROVED BY 2	) FOR =\$	EXCHANGE R	=\$1.00	=\$1.00 DIFFERENCES  Amount verified; correct for payment (Signature or initials)			
	PARTIAL FINAL								
	PROGRESS ADVANCE	TITLE							
Pur	suant to authori	ity vested in m	ne, I certify that this vouche	er is correct and p	proper for paym	ent.			
	(Date)		(Authorized Certifyi					(Title)	
			F	ACCOUNTING C	LASSIFICATIO	DN			
P A I	CHECK NUMI	BER O	N ACCOUNT OF U.S. TRE	EASURY	CHECK NU	IMBER	(	ON (Nan	me of bank)
D B Y	CASH \$	D	ATE		PAYEE <sup>3</sup>				
2. If t	he ability to certify	and authority to a	t name of currency.  upprove are combined in one persource over his official title.	on, one signature only	is necessary; other	rwise the a	pproving	PER	
3. W na	officer will sign in the space provided, over his official title.  When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.								

PRIVACY ACT STATEMENT

The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.

Re De	undard Form 1034 vised October 1987 partment of the Tre FM 4-2000		PUBLIC VOI SERVICE	VOUCHER NUMBER					
DE U.S	PARTMEN S. MARSHA	T OF JUST		08/0 CONTI	DATE VOUCHER PREPARED 08/04/2017 CONTRACT NUMBER AND DATE IGA# JB75M160				SCHEDULE NUMBER PAID BY
ı	SHVILLE, 7		,	REQU	ISITION NUMBE	R AND DA	TE		
	PAYEE'S NAME	P.O. Bo	on County Sheriff's C ox 196383 lle, TN 37219-6383	Office					DATE INVOICE RECEIVED
	AND ADDRESS		‡ 078217668	INVO	ICE# DCS	6O417T	R		DISCOUNT TERMS PAYEE'S ACCOUNT NUMBER
SHIE	PPED FROM		ТО			WI	EIGHT		GOVERNMENT B/L NUMBER
""	T ED T NOW		10			***	LIOITI		GOVERNIMENT B/L NUMBER
NUI	MBER AND DATE	DATE OF DELIVERY	ARTICLES (Enter description, item number	S OR SERVICES	supply schedule	QUAN-	UNIT PRICE		AMOUNT
	OF ORDER	OR SERVICE		ation deemed necessar		TITY	COST	PER	(1)
04/0	04/30/2017 Transport of federal inmates du month of April		nmates during t	the	2	45.7	,	91.4	
(Use	continuation sheet(s	s) if necessary)	(Payee must NOT	use the space	helow)			FOTAL.	91.4
PAYI	MENT:	APPROVED		EXCHANGE RA		DIFFER			91.4
	PROVISIONAL COMPLETE PARTIAL	BY <sup>2</sup>	=\$		=\$1.00	DIFFERENCES —			
	FINAL					Amount	verified; correct fo	or payment	
	PROGRESS ADVANCE	TITLE					ure or initials)		
Pur	suant to authori	ity vested in m	e, I certify that this vouche	r is correct and pro	oper for paym	ent.			
	(Date)		(Authorized Certifyii	<u> </u>				(Title)	
			Α	ACCOUNTING CL	ASSIFICATIO	)N			
P A I	CHECK NUMI	BER O	N ACCOUNT OF U.S. TRE	EASURY	CHECK NU	JMBER		ON (Nar	me of bank)
D B Y	CASH \$	D/	ATE		PAYEE <sup>3</sup>				
2. If t		and authority to a	oprove are combined in one perso	on, one signature only is	s necessary; other	erwise the a	approving	PER	
na	officer will sign in the space provided, over his official title.  When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.								

PRIVACY ACT STATEMENT

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		DAVIDSON C	OLINITY OLITON			
			DUNTY SHERI	FF'S OFFICE		
			F U.S. PRISON		ORT	
			Apr-17			
			•			
	MILEAGE	MILEAGE	OFFICER @	GUARD @	OFFICER/GUARD	TOTAL
DATE	@ .535	\$AMOUNT	17.50 HR	17.50 HR	\$AMOUNT	\$AMOUNT
04/26/17	20	10.70	1	1	35.00	45.7
04/26/17	20	10.70	1	1	35.00	45.7
	40.00	21.40	2.00	2.00	70.00	91.40

Re De	andard Form 1034 vised October 1987 partment of the Tre FM 4-2000		PUBLIC VOI SERVICE	VOUCHER NUMBER					
DE	PARTMEN	T OF JUST	-	08/0	DATE VOUCHER PREPARED 08/04/2017				SCHEDULE NUMBER
11	U.S. MARSHALS SERVICE 110 9TH AVENUE SOUTH, ROOM A-750 NASHVILLE, TN 37203				RACT NUMBER : # JB75M1   SITION NUMBE	60		F	PAID BY
	PAYEE'S		on County Sheriff's Cox 196383	Office				1	DATE INVOICE RECEIVED
	NAME AND	Nashvil	lle, TN 37219-6383						
	ADDRESS	DUNS#	± 078217668	INVO	CE# DCS	O517T	R		DISCOUNT TERMS  PAYEE'S ACCOUNT NUMBER
SHIF	PPED FROM		ТО			WE	EIGHT		GOVERNMENT B/L NUMBER
NUI	MBER AND DATE	DATE OF DELIVERY	ARTICLES (Enter description, item number	S OR SERVICES	yunnly achadula	QUAN-	UNIT PRICE		AMOUNT
	OF ORDER	OR SERVICE		ation deemed necessar		TITY	COST	PER	(1)
05/	01/2017	05/31/2017	Transport of federal i month of May	nmates during t	he				
	continuation sheet(s	s) if necessary)	(Payee must NOT	use the space	below)	!	,	TOTAL	
PAY	MENT: PROVISIONAL	APPROVED	FOR =\$	EXCHANGE RA	TE =\$1.00	DIFFER	ENCES —		
	COMPLETE   PARTIAL	BY <sup>2</sup>							
Ì⊑	FINAL				Amount verified; correct for paymer				
	PROGRESS ADVANCE	TITLE				(Signati	ure or initials)		
Pur	suant to author	ty vested in m	e, I certify that this vouche	r is correct and pro	per for paym	ent.			
	(Date)		(Authorized Certifyii	ng Officer) <sup>2</sup>				(Title)	
			Α	CCOUNTING CL	ASSIFICATIO	N			
P A I	CHECK NUM	BER OI	N ACCOUNT OF U.S. TRE	ASURY	CHECK NU	JMBER		ON (Nan	ne of bank)
D B Y	CASH \$	D/	ATE		PAYEE <sup>3</sup>				
1. W 2. If	hen stated in foreig the ability to certify	and authority to ap	oprove are combined in one perso	n, one signature only is	necessary; other	erwise the a	pproving	PER	
3. W	officer will sign in the space provided, over his official title.  When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.								

# PRIVACY ACT STATEMENT

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F	tandard Form 1034 levised October 198 Repartment of the Tro		PUBLIC VO						VOUCHER NUMBER	_
	TFM 4-2000		SERVICE	S OTHE	R THAN PE	RSON	<b>IAL</b>			
	S. DEPARTMENT, 8		ABLISHMENT AND LOCATION		ATE VOUCHER PRE	PARED			SCHEDULE NUMBER	
	S. MARSHA			_	ONTRACT NUMBER	AND DATE		-	PAID BY	_
			H, ROOM A-750		GA# JB75M1					
	ASHVILLE,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	R	EQUISITION NUMBE	R AND DA	TE.			
		<del></del>								
	PAYEE'S		on County Sheriff's (	Office						
	NAME AND		ox 196383 le, TN 37219-6383						DATE INVOICE RECEIVED	
	ADDRESS	DUNS#	078217668	IN	VOICE# DCS	O617F	RB		DISCOUNT TERMS	
		·		PAYEE'S ACCOUNT NUMBER						
SH	PPED FROM		ТО			WE	EIGHT		GOVERNMENT B/L NUMBER	
ΝL	MBER AND DATE	DATE OF DELIVERY		S OR SERVICES		QUAN-	UNIT PRICE		AMOUNT	
_	OF ORDER	OR SERVICE	(Enfer description, item number and other information)	ation deamed nece		TITY	CDST	PER		(1)
06/	01/2017	06/30/2017	7 Housing of federal inmates during the month of June			12	61		73	32
(Use	continuation sheet(s	s) it necessary)	(Payon must NOT	une the en	neo bolow)			ΓΟΤΑL		_
· 	MENT:	APPROVED	(Payee must NOT	EXCHANGE				UTAL	7;	32
Ë	PROVISIONAL COMPLETE		=\$ 	EXCHANGE	=\$1.00	DIFFERENCES				
Ē	PARTIAL	BY 2							<u> </u>	
	FINAL					Amount verified; correct for paymen				
F	PROGRESS ADVANCE	TITLE			(Signature or initials)					
Pu	rsuant to author	ity vested in me	e, I certify that this vouche	r is correct and	d proper for paym	ent.				
	(Date)		(Authorized Cartifyir	ng Officer) <sup>2</sup>				(Title)		
			Δ	ACCDUNTING	CLASSIFICATIO	N				
PAI	CHECK NUM	BER ON	NACCOUNT DF U.S. TRE	ASURY	CHECK NU	MBER	(	ON (Nar	ne of bank)	_
D B Y	CASH \$	DA	NTE		PAYEE 3					
1. ¥ 2. If		and authority to ap	prove are combined in one perso	on, one signature o	only is necessary; other	rwise the a	pproving	PER		
3. V		ceipted in the nam- capacity in which h	ver his official utile. e of a company or corporation, the signs, must appear. For exam					TITLE		

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